This Page Is Inserted by IFW Operations and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents will not correct images, please do not report the images to the Image Problem Mailbox.

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u>

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with my corrections or um Block I)

00530

02/27/2004

LERNER, DAVID, LITTENBERG, KRUMHOLZ & MENTLIK 600 SOUTH AVENUE WEST WESTFIELD, NJ 07090



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional papers, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USFTO, on the date indicated below.

(Depresidente como (Signature

æ.

APPLICATION NO. FILING DATE . FIRST NAMED INVENTOR.

ATTORNEY DOCKET.NO.

CONFIRMATION NO.

09/754.909

01/05/2001

BERTEK 3.0-025 DIV

3962

TITLE OF INVENTION: ADHESIVE MIXTURE FOR TRANSDERMAL DELIVERY OF HIGHLY PLASTICIZING DRUGS

APPLN, TYPE	SMALL ENTITY	185UB FE	SE.	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$300	S1630	05/27/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS]	
WEBMAN, EDWARD J		1617		424-486000		•
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered automey or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		ttorneys or LERNER	, DAVID, LITTENBER
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.					szomey or 2 KRUMHO	OLZ & MENTLIK, LLF
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.						

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Mylan Technologies, Inc.

St. Albans, Vermont

Please check the appropriate assignee ca	tegory or categories (will not be printed	Lon.the patent); 🔘 individual	P corporation of other private group entity	O government		
4e. The following fee(s) are enclosed:	4b. Pay	ment of Fee(s):				
Xì Issue Fee	C) A	is enclosed.				
XX Publication Fee	, or	syment by credit card. Form PTO-	2036 is attached.			
XXX.Advance Order - # of Copies	13 X T	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, Deposit Account Number 12-1095 (enclose an extra copy of this form).				

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

Authorized Signature	(Date) 4/8/04
NOTE: The Issue Fee and Publication Fee (if required	i) will not be accepted from any

interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, Abroardine, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

04/09/2004 EAREGAY2 00000006 121095 09754909

300.00 DA 39.00 DA

TRANSMIT THIS FORM WITH FEE(S)



Approved for use through 10/31/2002. OMB 0651-0031 U. S. Patent and Trademerk Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

FACSIMILE TRANSMISSION ISSUE FEE TRANSMITTAL AND PUBLICATION FEE

ATTORNEY DOCKET NO.: MTI 3.0-025 DIV

APPLICATION NO.: 09/754,909

CONFIRMATION NO.: 3962

MAILING DATE OF NOTICE OF ALLOWANCE: February 27, 2004

FAX NUMBER: (703) 746-4000

PAGES INCLUDING COVER SHEET: 2

PLEASE ACKNOWLEDGE RECEIPT TO SENDER AT (908) 654-7866.

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

April 8, 2004 Date

Signature

Arnold H. Krumholz; Reg. No. 25,428

Typed or printed name of person signing Certificate

487372_1.DOC